Temporary Emergency License (TEL) Application Checklist

* Before the TEL Applicant can begin acting as the Administrator they must first receive their Temporary License from this office. Please be advised that section 344.020, RSMo, prohibits an unlicensed person from acting or serving in the capacity of a licensed administrator without first securing a license from this office. To do so is a violation of the Board's statute and can be grounds to deny licensure.

If the applicant and/or facility have not heard from the Board office verifying that your TEL Application has been received please contact Board Office, applicants **cannot** begin working as the Administrator until the TEL Application has been approved.*

Fax or Email completed and signed copy of TEL Application

Fax Number: 573-526-4314Email: BNHA@health.mo.gov

☐ Completed Application for Full Licensure for TEL-Applicant on file with Board Office (or sent within 10 business days of Administrator position being vacated)

- If sending Application for Full Licensure with TEL Application the following <u>must</u> be included for Application for Full Licensure to be considered complete:
 - One Hundred fifty dollar (\$150.00) check or money order
 - Made payable to: Department of Health and Senior Services/Board of Nursing
 Home Administrators *This is a non-refundable licensure application fee*
 - Copy of your birth certificate or passport
 - A copy of high school diploma/high school transcript or equivalency certificate (GED).
 - Please note if your high school information is documented on official transcripts a copy of the diploma/GED is not required. A copy is required if the high school information is not documented on the official transcript.
 - Two (2) original letters of reference from non-relatives
 - Letters must contain a written, not typed, signature (body of letter can be typed) and must be dated within the last six (6) months of application
 - Mail full licensure application fee, licensure application, and required documents mentioned above to: (If over-nighting the fee please use the address provided on our website, www.health.mo.gov/bnha)
 - Department of Health and Senior Services/BNHA ATTN: FEE RECEIPTS
 PO Box 570
 Jefferson City, MO 65102-0570

^{*}Please note that the TEL Application cannot be processed until the TEL Application <u>and</u> application for full licensure (including required documents and fee) have been received in the Board office and these items must be received within 10 business days of the Administrator position being vacated.*